

The logo for PHARMAC (Te Pātaka Whaioranga) is a white circle containing the text 'PHARMAC' in a large, bold, sans-serif font, with 'TE PĀTAKA WHAIORANGA' in a smaller, all-caps, sans-serif font below it. The background of the entire page is a grey-to-white gradient with a large, intricate, white geometric pattern of concentric, overlapping lines that form a complex, maze-like or cellular structure.

PHARMAC
TE PĀTAKA WHAIORANGA

Pharmaceutical Management Agency
New Zealand
Pharmaceutical Schedule

Update

September 2023

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Summary of Pharmac decisions

EFFECTIVE 1 SEPTEMBER 2023

New listings (page 18)

- Colecalciferol (Clinicians) oral liq 188 mcg per ml (7,500 iu per ml)
- Atenolol (Atenolol Viartis) tab 100 mg
- Colestyramine (Colestyramine – Mylan) powder for oral suspension 4 g sachet, s29 and wastage claimable
- Simvastatin (Simvastatin Viartis) tab 10 mg, 20 mg and 80 mg
- Minoxidil (Minoxidil Roma) tab 10 mg, s29 and wastage claimable
- Vinorelbine (Navelbine S29) inj 10 mg per ml, 5 ml vial – PCT only – Specialist, s29
- Octreotide long-acting (Sandostatin LAR) inj depot 10 mg prefilled syringe and 20 mg prefilled syringe – Special Authority – Retail pharmacy
- Salbutamol with ipratropium bromide (Duolin Respules) nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule – Up to 20 neb available on a PSO, s29 and wastage claimable
- Amino acid formula without phenylalanine (PKU Build 20 Chocolate, Raspberry Lemonade, Smooth and Vanilla) powder 32 g sachets – Special Authority – Hospital pharmacy [HP3]

Changes to restrictions (pages 19-22)

- Hypoplastic and Haemolytic – amended Special Authority criteria
- Pegfilgrastim (Ziextenzo) inj 6 mg per 0.6 ml syringe – removal of brand switch fee
- Flecainide acetate (Flecainide Controlled Release Teva) cap long-acting 100 mg – removal of may dispense stat
- Lacosamide (Vimpat) tab 50 mg and 100 mg – amended Special Authority criteria
- Stiripentol (Diacomit) cap 250 mg and powder for oral liq 250 mg sachet – amended Special Authority criteria, removal of s29 and wastage claimable
- Gemtuzumab ozogamicin (Mylotarg) inj 5 mg vial – amended Special Authority criteria
- Sirolimus (Rapamune) tab 1 mg, 2 mg and oral liq 1 mg per ml – amended Special Authority criteria
- Tacrolimus (Tacrolimus Sandoz) cap 0.5 mg, 0.75 mg, 1 mg and 5 mg – amended Special Authority criteria
- Pilocarpine nitrate (Minims Pilocarpine) eye drops 2% single dose – reinstate stat dispensing

Summary of Pharmac decisions – effective 1 September 2023 (continued)

Increased subsidy (pages 23-26)

- Gliclazide (Glizide) tab 80 mg
- Ursodeoxycholic acid (Ursosan) cap 250 mg
- Ispaghula (Psyllium) husk (Konsyl-D) powder for oral soln
- Docusate sodium (Coloxyl) tab 50 mg and 120 mg
- Poloxamer (Coloxyl) oral drops 10%
- Macrogol 3350 with potassium chloride, sodium bicarbonate and sodium chloride (Molaxole) powder for oral soln 13.125 g with potassium chloride 46.6 mg, sodium bicarbonate 178.5 mg and sodium chloride 350.7 mg
- Triamcinolone acetonide (Kenalog in Orabase) paste 0.1%
- Nystatin (Nilstat) oral liq 100,000 u per ml
- Pyridoxine hydrochloride (Vitamin B6 25) tab 25 mg
- Calcium carbonate (Calci-Tabs) tab 1.25 g (500 mg elemental)
- Potassium iodate (NeuroTabs) tab 253 mcg (150 mcg elemental iodine)
- Glucose [Dextrose] (Biomed) inj 50%, 10 ml ampoule and 90 ml bottle
- Amlodipine (Vasorex) tab 2.5 mg, 5 mg and 10 mg
- Clonidine (Mylan) patch 2.5 mg, 100 mcg per day and 7.5 mg, 300 mcg per day
- Indapamide (Dapa-Tabs) tab 2.5 mg
- Simvastatin (Simvastatin Viatrix) tab 40 mg
- Isosorbide mononitrate tab 20 mg (Ismo 20), tab long-acting 40 mg (Ismo 40 retard) and tab long-acting 60 mg (Duride)
- Amorolfine (Myconail) nail soln 5%
- Triamcinolone acetonide (Aristocort) crm 0.02% and oint 0.02%
- Methylprednisolone aceponate (Advantan) crm 0.1% and oint 0.1%
- Permethrin (A-Scabies) lotn 5%
- Pimecrolimus (Elidel) cream 1%
- Pine tar with trolamine laurilsulfate and fluorescein (Pinetarsol) soln 2.3% with trolamine laurilsulfate and fluorescein sodium
- Cyproterone acetate with ethinyloestradiol (Ginet) tab 2 mg with ethinyloestradiol 35 mcg and 7 inert tabs
- Nystatin (Nilstat) vaginal crm 100,000 u per 5 g with applicator(s)
- Oestriol (Ovestin) crm 1 mg per g with applicator and pessaries 500 mcg
- Sodium citro-tartrate (Ural) grans eff 4 g sachets

Summary of Pharmac decisions – effective 1 September 2023 (continued)

- Triamcinolone acetonide inj 10 mg per ml (Kenacort-A 10) and inj 40 mg per ml (Kenacort-A 40)
- Oestrinol (Ovestin) tab 2 mg
- Desmopressin acetate (Desmopressin-PH&T) nasal spray 10 mcg per dose
- Amoxicillin grans for oral liq 125 mg per 5 ml (Alphamox 125) and grans for oral liq 250 mg per 5 ml (Alphamox 250)
- Amoxicillin with clavulanic acid (Curam Due 500/125) tab 500 mg with clavulanic acid 125 mg
- Benzylpenicillin sodium [Penicillin G] (Sandoz) inj 600 mg (1 million units) vial
- Flucloxacillin (Flucil) inj 1 g vial
- Vancomycin (Mylan) inj 500 mg vial
- Terbinafine (Deolate) tab 250 mg
- Lamivudine tab 100 mg (Zetlam) and tab 150 mg (Lamivudine Viatrix)
- Darunavir (Darunavir Viatrix) tab 400 mg and 600 mg
- Paracetamol (Gacet) suppos 125 mg, 250 mg and 500 mg
- Olanzapine (Zypine ODT) tab orodispersible 5 mg and 10 mg
- Rizatriptan (Rizamelt) tab orodispersible 10 mg
- Quetiapine (Quetapel) tab 25 mg, 100 mg, 200 mg and 300 mg
- Temazepam (Normison) tab 10 mg
- Vinorelbine (Baxter) inj 1 mg for ECP
- Atropine sulphate (Atropt) eye drops 1%

Decreased subsidy (page 24)

- Clonidine (Mylan) patch 5 mg, 200 mcg per day

Tender News

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) changes – effective 1 October 2023

Chemical Name	Presentation; Pack size	PSS/SSS	PSS/SSS brand (and supplier)
Oxaliplatin	Inj 5 mg per ml, 20 ml vial; 1 inj	PSS	Alchemy Oxaliplatin (Alchemy)
Vinorelbine	Cap 20 mg; 1 cap	PSS	Vinorelbine Te Arai (Te Arai)
Vinorelbine	Cap 30 mg; 1 cap	PSS	Vinorelbine Te Arai (Te Arai)
Vinorelbine	Cap 80 mg; 1 cap	PSS	Vinorelbine Te Arai (Te Arai)

Looking Forward

This section is designed to alert both pharmacists and prescribers to possible future changes to the Pharmaceutical Schedule. It may also assist pharmacists, distributors and wholesalers to manage stock levels.

Decisions for implementation 1 October 2023

- Heparin sodium (Heparin Sodium Panpharma) inj 5,000 iu per ml, 5 ml vial – removal of brand switch fee
- Pertuzumab inj 30 mg per ml, 14 ml vial (Perjeta) and inj 420 mg for ECP (Baxter) – amended Special Authority criteria
- Phenobarbitone (Noumed Phenobarbitone) tab 30 mg - removal of brand switch fee
- Trastuzumab inj 150 mg vial and 440 mg vial (Herceptin) and inj 1 mg for ECP (Baxter) – amended Special Authority criteria

Possible decisions for future implementation 1 October 2023

- Emicizumab (Hemlibra) inj 30 mg in 1 ml vial, inj 60 mg in 0.4 ml vial, inj 105 mg in 0.7 ml vial & inj 150 mg in 1 ml vial – amended Special Authority criteria
- Ocrelizumab (Ocrevus) inj 30 mg per ml, 10 ml vial – amended Special Authority criteria

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Abacavir sulphate with lamivudine	Tab 600 mg with lamivudine 300 mg	Abacavir/Lamivudine Viatris	2025
Acarbose	Tab 50 mg & 100 mg	Acccarb	2024
Acetylcysteine	Inj 200 mg per ml, 10 ml ampoule	Martindale Pharma	2024
Aciclovir	Tab dispersible 400 mg & 800 mg	Lovir	2025
	Tab dispersible 200 mg Eye oint 3%, 4.5 g OP	ViruPOS	2024
Adalimumab (Amgevita)	Inj 20 mg per 0.4 ml prefilled syringe, inj 40 mg per 0.8 ml prefilled syringe & inj 40 mg per 0.8 ml prefilled pen	Amgevita	31/07/2026
Adrenaline	Inj 0.15 mg per 0.3 ml auto-injector, 1 OP	Epipen Jr	2025
	Inj 0.3 mg per 0.3 ml auto- injector, 1 OP	Epipen	
Amiodarone hydrochloride	Inj 50 mg per ml, 3 ml ampoule	Max Health Aratac	2025
	Tab 100 mg & 200 mg		
Aprepitant	Cap 2 x 80 mg and 1 x 125 mg	Emend Tripack	2024
Aqueous cream	Crn, 500 g	GEM Aqueous Cream	2024
Ascorbic acid	Tab 100 mg	CVite	2025
Atazanavir sulphate	Cap 150 mg & 200 mg	Atazanavir Mylan	2025
Atenolol	Tab 50 mg	Viatris	2024
	Tab 100 mg	Mylan Atenolol	
Atorvastatin	Tab 10 mg, 20 mg, 40 mg & 80 mg	Lorstat	2024
Atropine sulphate	Inj 600 mcg per ml, 1 ml ampoule	Martindale	2024
Azathioprine	Tab 25 mg	Azamun	2025
	Tab 50 mg		
Azithromycin	Tab 500 mg	Zithromax	2024
Bacillus calmette-guerin vaccine	Inj Mycobacterium bovis BCG (Bacillus Calmette-Guerin), Danish strain 1331, live attenuated, vial with diluent	BCG Vaccine	2024
Baclofen	Inj 2 mg per ml, 5 ml ampoule	Medsurge	2024
Betamethasone dipropionate with calcipotriol	Oint 500 mcg with calcipotriol 50 mcg per g, 30 g OP	Daivobet	2024
	Gel 500 mcg with calcipotriol 50 mcg per g, 60 g OP		
Betamethasone valerate	Lotn 0.1%, 50 ml OP	Betnovate Beta Ointment Beta Cream Beta Scalp	2024
	Oint 0.1%, 50 g OP		
	Crn 0.1%, 50 g OP		
	Scalp app 0.1%, 100 ml OP		

*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Bimatoprost	Eye drops 0.03%, 3 ml OP	Bimatoprost Multichem	2024
Bisacodyl	Tab 5 mg	Bisacodyl Viatris Pharmacy Health Lax-suppositories	2025
	Suppos 10 mg		2024
Bosentan	Tab 62.5 mg & 125 mg	Bosentan Dr Reddy's	2024
Brimonidine tartrate	Eye drops 0.2%, 5 ml OP	Arrow-Brimonidine	2024
Brinzolamide	Eye drops 1%, 5 ml OP	Azopt	2024
Bezafibrate	Tab 200 mg	Bezalip Bezalip Retard	2024
	Tab long-acting 400 mg		
Buprenorphine with naloxone	Tab sublingual 2 mg with naloxone 0.5 mg & 8 mg with naloxone 2 mg	Buprenorphine Naloxone BNM	2025
Buspirone hydrochloride	Tab 5 mg & 10 mg	Buspirone Viatris	2024
Calamine	Crn, aqueous, BP, 100 g	Calamine-AFT	2024
Calcitriol	Cap 0.25 mcg & 0.5 mcg	Calcitriol-AFT	2025
Candesartan cilexetil	Tab 4 mg, 8 mg, 16 mg & 32 mg	Candestar	2024
Carbimazole	Tab 5 mg	Neo-Mercazole	2025
Cefaclor monohydrate	Cap 250 mg	Ranbaxy Cefaclor	2025
	Grans for oral liq 125 mg per 5 ml		
Cefalexin	Cap 250 mg & 500 mg	Cephalexin ABM Flynn	2025
	Grans for oral liq 25 mg per ml & 50 mg per ml		2024
Ceftriaxone	Inj 500 mg & 1 g vial	Ceftriaxone-AFT	2025
Celecoxib	Cap 100 mg & 200 mg	Celecoxib Pfizer	2025
Cetirizine hydrochloride	Tab 10mg	Zista Hisatclear	2026
	Oral liq 1 mg per ml, 200 ml		2024
Cetomacrogol	Crn BP, 500 g	Cetomacrogol-AFT	2024
Cetomacrogol with glycerol	Crn 90% with glycerol 10%, 500 ml OP	Evara	2025
	Crn 90% with glycerol 10%, 1,000 ml OP		
Chloramphenicol	Eye drops 0.5%	Chlorsig Devatis	2025
	Eye oint 1%, 5 g OP		
Chlortalidone [Chlorthalidone]	Tab 25 mg	Hygroton	2025
Cinacalcet	Tab 30 mg & 60 mg	Cinacalcet Devatis	2024
Ciprofloxacin	Eye drops 0.3%, 5 ml OP	Ciprofloxacin Teva	2024
Citalopram hydrobromide	Tab 20 mg	Celapram	2025
		PSM Citalopram	2024
Clarithromycin	Tab 250 mg & 500 mg	Klacid	2024

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Clindamycin	Inj 150 mg per ml	Hameln	2025
Clobetasol propionate	Crm & oint 0.05%, 30 g OP Scalp app 0.05%, 30 ml OP	Dermol	2025
Clomipramine hydrochloride	Tab 10 mg & 25 mg	Clomipramine Teva	2024
Clonidine hydrochloride	Tab 25 mcg Inj 150 mcg per ml, 1 ml ampoule Tab 150 mcg	Clonidine Teva Medsurge Catapres	2025 2024
Clopidogrel	Tab 75 mg	Arrow – Clopid	2025
Clotrimazole	Vaginal crm 1% with applicators, 35 g OP Vaginal crm 2% with applicators, 20 g OP Crm 1%, 20 g OP	Clomazol	2025
Codeine phosphate	Tab 15 mg Tab 30 mg & 60 mg	Noumed	2025
Colchicine	Tab 500 mcg	Colgout	2025
Compound electrolytes	Powder for oral soln	Electral	2025
Crotamiton	Crm 10%, 20 g OP	Itch-soothe	2024
Cyclizine hydrochloride	Tab 50 mg	Nausicalm	2024
Cyclizine lactate	Inj 50 mg per ml, 1 ml ampoule	Hameln	2025
Cyclophosphamide	Tab 50 mg	Cylconex	2024
Cyproterone acetate	Tab 50 mg & 100 mg	Siterone	2024
Dexamethasone	Tab 0.5 mg & 4 mg	Dexmethsone	2024
Dexamethasone phosphate	Inj 4 mg per ml, 1 ml & 2 ml ampoule	Hameln	2025
Dexamfetamine sulfate	Tab 5 mg	PSM	2024
Diazepam	Rectal tubes 5 mg	Stesolid	2025
Diclofenac	Eye drops 0.1%, 5 ml OP	Voltaren Ophtha	2024
Diclofenac sodium	Tab EC 25 mg & 50 mg	Diclofenac Sandoz	2024
Digoxin	Tab 62.5 mcg Tab 250 mcg	Lanoxin PG Lanoxin	2025
Dihydrocodeine tartrate	Tab long-acting 60 mg	DHC Continus	2025
Diltiazem hydrochloride	Cap long-acting 120 mg Cap long-acting 180 mg & 240 mg	Diltiazem CD Clinect Cardizem CD	2025 2024
Dimethicone	Crm 5% pump bottle, 500 ml OP Lotn 4%, 200 ml OP	healthE Dimethicone 5% healthE Dimethicone 4%	2025

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Diphtheria, tetanus and pertussis vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe	Boostrix	2024
Diphtheria, tetanus, pertussis and polio vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin and 80 D-antigen units poliomyelitis virus in 0.5ml syringe	Infanrix IPV	2024
Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin, 80 D-AgU polio virus, 10 mcg hepatitis B surface antigen in 0.5ml syringe	Infanrix-hexa	2024
Disulfiram	Tab 200 mg	Antabuse	2024
Docusate sodium with sennosides	Tab 50 mg with sennosides 8 mg	Laxsol	2025
Domperidone	Tab 10 mg	Domperidone Viatris	2025
Dorzolamide with timolol	Eye drops 2% with timolol 0.5%, 5 ml OP	Dortimopt	2024
Emtricitabine with tenofovir disoproxil	Tab 200 mg with tenofovir disoproxil 245 mg (300 mg as a maleate)	Tenofovir Disoproxil Emtricitabine Viatris	2025
Entacapone	Tab 200 mg	Comtan	2024
Eplerenone	Tab 25 mg & 50 mg	Inspra	2024
Erythromycin (as lactobionate)	Inj 1 g	Erythromycin IV	2025
Escitalopram	Tab 10 mg & 20 mg	Escitalopram (Ethics)	2024
Etanercept	Inj 25 mg Inj 50 mg autoinjector Inj 50 mg prefilled syringe	Enbrel	2024
Ethinylloestradiol with levonorgestrel	Tab 20 mcg with levonorgestrel 100 mcg and 7 inert tablets Tab 30 mcg with levonorgestrel 150 mcg and 7 inert tablets	Lo-Oralcon 20 ED Oralcon 30 ED	2025
Felodipine	Tab long-acting 5 mg Tab long-acting 10 mg	Felo 5 ER Felo 10 ER	2024

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Fentanyl	Inj 50 mcg per ml, 2ml ampoule Inj 50 mcg per ml, 10 ml ampoule Patch 12.5 mcg per hour Patch 25 mcg per hour Patch 50 mcg per hour Patch 75 mcg per hour Patch 100 mcg per hour	Boucher and Muir Fentanyl Sandoz	2024
Ferrous fumarate	Tab 200 mg (65 mg elemental)	Ferro-tab	2024
Ferrous fumarate with folic acid	Tab 310 mg (100 mg elemental) with folic acid 350 mcg	Ferro-F-Tabs	2024
Ferrous sulfate	Tab long-acting 325 mg (105 mg elemental) Oral liq 30 mg (6 mg elemental) per ml	Ferrograd Ferodan	2025
Filgrastim	Inj 300 mcg per 0.5 ml & 480 mcg per 0.5 ml	Nivestim	2024
Flecainide acetate	Cap long-acting 100 mg & 200 mg	Flecainide Controlled Release Teva	2026
Flucloxacillin	Cap 250 mg & 500 mg Grans for oral liq 25 mg per ml Grans for oral liq 50 mg per ml	Flucloxacillin-AFT AFT	2024
Fludrocortisone acetate	Tab 100 mcg	Florinef	2025
Fluorouracil sodium	Crn 5%, 20 g OP	Efudix	2024
Fluoxetine hydrochloride	Cap 20 mg Tab dispersible 20 mg, scored	Arrow-Fluoxetine Fluox	2025
Fluticasone propionate	Metered aqueous nasal spray, 50 mcg per dose, 120 dose OP	Flixonase Hayfever & Allergy	2024
Folic acid	Tab 5 mg	Folic Acid Viatris	2024
Furosemide [Frusemide]	Inj 10 mg per ml, 2 ml ampoule Tab 40 mg	Furosemide-Baxter IPCA-Frusemide	2025 2024
Gabapentin	Cap 100 mg, 300 mg & 400 mg	Nupentin	2024
Glatiramer acetate	Inj 40 mg prefilled syringe	Copaxone	2025
Glibenclamide	Tab 5 mg	Daonil	2024
Glipizide	Tab 5 mg	Minidiab	2024
Glycerol	Suppos 4 g	Lax suppositories Glycerol	2025
Glyceryl trinitrate	Oint 0.2%, 30 g OP	Rectogesic	2024
Glycopyrronium bromide	Inj 200 mcg per ml, 1 ml ampoule	Robinul	2025
Heparin sodium	Inj 5,000 iu per ml, 5 ml vial	Heparin Sodium Panpharma	2025
Hepatitis A vaccine	Inj 1440 ELISA units in 1 ml syringe Inj 720 ELISA units in 0.5 ml syringe	Havrix Havrix Junior	2024

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Hepatitis B recombinant vaccine	Inj 20 mcg per 1 ml prefilled syringe	Engerix-B	2024
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine [HPV]	Inj 270 mg in 0.5 ml syringe	Gardasil 9	2024
Hydrocortisone	Crn 1%, 500 g	Noumed	2025
	Crn 1%; 30 g OP	Ethics	
	Inj 100 mg vial	Solu-Cortef	2024
Hydrocortisone butyrate	Oint 0.1%, 100 g OP	Locoid	2024
	Scalp lotn 0.1%, 100 ml OP Milky emuls 0.1%, 100 ml OP	Locoid Crelo	
Hydrocortisone with miconazole	Crn 1% with miconazole 2%, 15 g OP	Micreme H	2024
Hydroxocobalamin	Inj 1 mg per ml, 1 ml ampoule	Hydroxocobalamin Panpharma	2024
Ibuprofen	Oral liq 20 mg per ml, 200 ml	Ethics	2024
	Tab long-acting 800 mg	Brufen SR	
	Tab 200 mg	Relieve	
Iloprost	Nebuliser soln 10 mcg per ml, 2 ml	Vebulis	2025
Intra-uterine device	IUD 29.1 mm length x 23.2 mm width	Choice TT380 Short	2025
	IUD 33.6 mm length x 29.9 mm width	Choice TT380 Standard	
	IUD 35.5 mm length x 19.6 mm width	Choice Load 375	
Isoniazid	Tab 100 mg	PSM	2024
Isoniazid with rifampicin	Tab 100 mg with rifampicin 150 mg	Rifinah	2024
	Tab 150 mg with rifampicin 300 mg		
Isotretinoin	Cap 5 mg, 10 mg & 20 mg	Oratane	2024
Labetalol	Tab 100 mg & 200 mg	Trandate	2024
Lactulose	Oral liq 10 g per 15 ml, 500 ml	Laevolac	2025
Lansoprazole	Cap 15 mg & 30 mg	Lanzol Relief	2024
Latanoprost	Eye drop 0.005%, 2.5 ml OP	Teva	2024
Letrozole	Tab 2.5 mg	Letrole	2024
Levomepromazine hydrochloride	Inj 25 mg per ml, 1 ml ampoule	Wockhardt	2025
Levonorgestrel	Tab 1.5 mg	Levonorgestrel BNM	2025
Lidocaine [Lignocaine]	Gel 2%, 11 ml urethral syringe	Instillagel lido	2025
Lisinopril	Tab 5 mg, 10 mg & 20 mg	Ethics Lisinopril	2025
Lithium carbonate	Tab long-acting 400 mg	Priadel	2024
Loperamide hydrochloride	Cap 2 mg	Diamide Relief	2025
Lopinavir with ritonavir	Tab 100 mg with ritonavir 25 mg	Lopinavir/Ritonavir	2024
	Tab 200 mg with ritonavir 50 mg	Mylan	

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Loratadine	Tab 10 mg	Lorafix	2025
Lorazepam	Tab 1 mg & 2.5 mg	Ativan	2024
Losartan potassium with hydrochlorothiazide	Tab 50 mg with hydrochlorothiazide 12.5 mg	Arrow-Losartan & Hydrochlorothiazide	2025
Measles, mumps and rubella vaccine	Inj, measles virus 1,000 CCID50, mumps virus 5,012 CCID50, Rubella virus 1,000 CCID50; prefilled syringe/ampoule of diluent 0.5 ml	Priorix	2024
Mebendazole	Tab 100 mg	Vermox	2024
Melatonin	Tab modified-release 2 mg	Vigisom	2024
Meningococcal (groups A, C, Y and W-135) conjugate vaccine	Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5 ml vial	Menactra	2024
Mercaptopurine	Tab 50 mg	Puri-nethol	2025
Metformin hydrochloride	Tab immediate-release 500 mg & 850 mg	Metformin Viatris	2024
Methadone	Oral liq 2 mg per ml Oral liq 5 mg per ml Oral liq 10 mg per ml	Biodone Biodone Forte Biodone Extra Forte	2024
Methadone hydrochloride	Tab 5 mg	Methadone BNM	2025
Methenamine (hexamine) hippurate	Tab 1 g	Hiprex	2025
Methotrexate	Tab 2.5 mg & 10 mg	Trexate	2024
Metoclopramide	Inj 5 mg per ml, 2 ml ampoule	Baxter	2025
Metoprolol tartrate	Tab 50 mg & 100 mg	IPCA-Metoprolol	2024
Miconazole	Oral gel 20 mg per g, 40 g OP	Decozol	2024
Midodrine	Tab 2.5 mg & 5 mg	Midodrine Medsurge	2024
Mirtazapine	Tab 30 mg & 45 mg	Noumed	2024
Moclobemide	Tab 150 mg & 300 mg	Aurorix	2024
Modafinil	Tab 100 mg	Modavigil	2024
Mometasone furoate	Crn 0.1%, 15 g OP Crn 0.1%, 50 g OP Oint 0.1%, 15 g OP Oint 0.1%, 50 g OP Lotn 0.1%, 30 ml OP	Elocon Alcohol Free Elocon	2024
Montelukast	Tab 4 mg, 5 mg & 10 mg	Montelukast Viatris	2025

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Morphine sulphate	Cap long-acting 10 mg, 30 mg, 60 mg & 100 mg Inj 5 mg per ml, 1 ml ampoule Inj 10 mg per ml, 1 ml ampoule Inj 15 mg per ml, 1 ml ampoule Inj 30 mg per ml, 1 ml ampoule	m-Eslon Medsurge	2025
Multivitamins	Tab (BPC cap strength)	Mvite	2025
Nadolol	Tab 40 mg & 80 mg	Nadolol BNM	2024
Naloxone hydrochloride	Inj 400 mcg per ml, 1 ml ampoule	Hameln	2024
Naproxen	Tab 250 mg Tab 500 mg Tab long-acting 750 mg Tab long-acting 1 g	Noflam 250 Noflam 500 Naprosyn SR 750 Naprosyn SR 1000	2024
Neostigmine metilsulfate	Inj 2.5 mg per ml, 1 ml ampoule	Max Health	2024
Nevirapine	Tab 200 mg	Nevirapine Alphapharm	2024
Nitrofurantoin	Tab 50 mg & 100 mg	Nifuran	2024
Norethisterone	Tab 350 mcg	Noriday 28	2024
Nortriptyline hydrochloride	Tab 10 mg & 25 mg	Norpress	2025
Octreotide	Inj 50 mcg per ml, 1 ml ampoule Inj 100 mcg per ml, 1 ml ampoule Inj 500 mcg per ml, 1 ml ampoule	Max Health	2024
Octreotide long-acting	Inj depot 10 mg, 20 mg & 30 mg prefilled syringe	Octreotide Depot Teva	2024
Oil in water emulsion	Crm, 500 g	Fatty Cream AFT	2024
Olopatadine	Eye drops 0.1%, 5 ml OP	Olopatadine Teva	2025
Omeprazole	Inj 40 mg ampoule with diluent	Dr Reddy's Omeprazole	2025
Ondansetron	Tab 4 mg & 8 mg	Periset	2025
Ornidazole	Tab 500 mg	Arrow-Ornidazole	2024
Orphenadrine citrate	Tab 100 mg	Norflex	2024
Oxycodone hydrochloride	Inj 10 mg per ml, 1 ml and 2 ml ampoule Inj 50 mg per ml, 1 ml ampoule Tab controlled-release 5 mg, 10 mg, 20 mg, 40 mg & 80 mg Cap immediate-release 5 mg, 10 mg & 20 mg Oral liq 5 mg per 5 ml	Hameln Oxycodone Sandoz OxyNorm	2024
Oxytocin	Inj 5 iu per ml, 1 ml ampoule Inj 10 iu per ml, 1 ml ampoule	Oxytocin BNM	2025
Oxytocin with ergometrine maleate	Inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml ampoule	Syntometrine	2025

*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Pancreatic enzyme	Cap prandreatin 150 mg (amylase 8,000 Ph Eur U lipase 10,000 Ph Eur U, total protease 600 Ph Eur U)	Creon 10000	2024
	Cap prandreatin 300 mg (amylase 18,000 Ph Eur U lipase 25,000 Ph Eur U, total protease 1,000 Ph Eur U)	Creon 25000	
Pantoprazole	Tab EC 20 mg & 40 mg	Panzop Relief (Viatris)	2025
Paracetamol	Oral liq 120 mg per 5 ml	Paracetamol (Ethics)	2025
	Oral liq 250 mg per ml, 200 ml	Pamol	
	Tab 500 mg-bottle pack Tab 500 mg-blister pack	Noumed Paracetamol Pacimol	2024
Paracetamol with codeine	Tab paracetamol 500 mg with codeine phosphate 8 mg	Paracetamol + Codeine	2025
Paraffin	Oint liquid paraffin 50% with white soft paraffin 50%, 500 g OP	White Soft Liquid Paraffin AFT	2025
Paroxetine	Tab 20 mg	Loxamine	2025
Pegfilgrastim	Inj 6 mg per 0.6 ml syringe	Ziextenzo	2025
Perindopril	Tab 2 mg & 4 mg	Coversyl	2024
Pethidine hydrochloride	Tab 50 mg	Noumed Pethidine	2025
Phenoxyethylpenicillin (Penicillin V)	Grans for oral liq 125 mg per 5 ml & 250 mg per 5 ml	AFT	2025
	Cap 250 mg Cap 500 mg	Cilicaine VK	2024
Pioglitazone	Tab 15 mg, 30 mg & 45 mg	Vexazone	2024
Pneumococcal (PCV10) conjugate vaccine	Inj 1 mcg of pneumococcal polysaccharide serotypes 1, 5, 6B, 7F, 9V, 14 and 23F; 3 mcg of pneumococcal polysaccharide serotypes 4, 18C and 19F in 0.5 ml prefilled syringe	Synflorix	2024
Pneumococcal (PPV23) polysaccharide vaccine	Inj 575 mcg in 0.5 ml prefilled syringe (25 mcg of each 23 pneumococcal serotype)	Pneumovax 23	2024
Poliomyelitis vaccine	Inj 80D antigen units in 0.5 ml syringe	IPOL	2024
Posaconazole	Oral liq 40 mg per ml, 105 ml OP	Devatis	2025
	Tab modified-release 100 mg	Posaconazole Juno	
Povidone iodine	Antiseptic solution 10%, 100 ml	Riodone	2024
Pramipexole hydrochloride	Tab 0.25 mg & 1 mg	Ramiprex	2025
Prednisolone	Oral liq 5 mg per ml, 30 ml OP	Redipred	2024
Progesterone	Cap 100 mg	Utrogestan	2025
Promethazine hydrochloride	Tab 10 mg & 25 mg	Allersoothe	2025

*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Propranolol	Tab 10 mg Tab 40 mg	Drofate IPCA-Propranolol	2024
Quinapril	Tab 5 mg Tab 10 mg Tab 20 mg	Arrow-Quinapril 5 Arrow-Quinapril 10 Arrow-Quinapril 20	2024
Quinapril with hydrochlorothiazide	Tab 10 mg with hydrochlorothiazide 12.5 mg Tab 20 mg with hydrochlorothiazide 12.5 mg	Accuretic 10 Accuretic 20	2024
Ramipril	Cap 1.25 mg, 2.5 mg, 5 mg & 10 mg	Tryzan	2024
Riluzole	Tab 50 mg	Rilutek	2024
Risedronate sodium	Tab 35 mg	Risedronate Sandoz	2025
Rituximab	Inj 100 mg per 10 ml vial & 500 mg per 50 ml vial	Riximyo	30/09/2023
Rivastigmine	Patch 4.6 mg per 24 hour Patch 9.5 mg per 24 hour	Rivastigmine Patch BNM 5 Rivastigmine Patch BNM 10	2024
Ropinirole hydrochloride	Tab 0.25 mg, 1 mg, 2 mg & 5 mg	Ropin	2025
Rotavirus oral vaccine	Oral susp live attenuated human rotavirus 1,000,000 CCID50 per dose, prefilled oral applicator	Rotarix	2024
Roxithromycin	Tab 150 mg & 300 mg	Arrow-Roxithromycin	2026
Salbutamol	Oral liq 400 mcg per ml, 150 ml Nebuliser soln 1 mg per ml, 2.5 ml ampoule Nebuliser soln 2 mg per ml, 2.5 ml ampoule	Ventolin Asthalin	2024
Salbutamol with ipratropium bromide	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule	Duolin	2024
Sertraline	Tab 50 mg & 100 mg	Setrona	2025
Sildenafil	Tab 25 mg, 50 mg & 100 mg	Vedafil	2024
Sodium chloride	Inj 0.9%, 5 ml, 10 ml & 20 ml ampoule	Fresenius Kabi	2025
Sodium citrate with sodium lauryl sulphoacetate	Enema 90 mg with sodium lauryl sulphoacetate 9 mg per ml, 5 ml	Micolette	2025
Sodium cromoglicate	Eye drops 2%, 10 ml OP	Allerfix	2025
Sodium fusidate [Fusidic acid]	Crn 2%, 5 g OP Oint 2%, 5 g OP	Foban	2024
Sodium hyaluronate [hyaluronic acid]	Eye drops 1 mg per ml, 10 ml OP	Hyo-Fresh	2024
Solifenacin succinate	Tab 5 mg and 10 mg	Solifenacin Viatris	2024
Somatropin (Omnitrope)	Inj 5 mg, 10 mg & 15 mg cartridge	Omnitrope	2024

*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to September 2023

Generic Name	Presentation	Brand Name	Expiry Date*
Sotalol	Tab 80 mg & 160 mg	Mylan	2025
Spironolactone	Tab 25 mg & 100 mg	Spiractin	2025
Sumatriptan	Tab 50 mg & 100 mg	Sumagran	2024
Sunitinib	Cap 12.5 mg, 25 mg & 50 mg	Sunitinib Pfizer	2024
Sunscreens, proprietary	Lotn, 200 g OP	Marine Blue Lotion SPF lotn 50+	2025
Tamsulosin	Cap 400 mcg	Tamsulosin-Rex	2025
Tenofovir disoproxil	Tab 245 mg (300 mg as a maleate)	Tenofovir Disoproxil Viatris	2025
Tenoxicam	Tab 20 mg	Tilcotil	2025
Tetrabenazine	Tab 25 mg	Motetis	2025
Thiamine hydrochloride	Tab 50 mg	Thiamine multichem	2025
Ticagrelor	Tab 90 mg	Ticagrelor Sandoz	2024
Tobramycin	Inj 40 mg per ml, 2 ml vial	Tobramycin Viatris	2024
Tranexamic acid	Tab 500 mg	Mercury Pharma	2025
Travoprost	Eye drops 0.004%, 2.5 ml OP	Travatan	2024
Tretinoin	Crn 0.5 mg per g, 50 g OP	ReTrieve	2024
Trimethoprim	Tab 300 mg	TMP	2024
Trimethoprim with sulphamethoxazole [co-trimoxazole]	Tab trimethoprim 80 mg and sulphamethoxazole 400 mg	Trisul	2024
Tuberculin PPD [Mantoux] test	Inj 5 TU per 0.1 ml, 1 ml vial	Tubersol	2024
Valaciclovir	Tab 500 mg & 1,000 mg	Valclovir	2024
Valganciclovir	Tab 450 mg	Valganciclovir Viatris	2024
Varenicline tartrate	Tab 0.5 mg x 11 and 1 mg x 42, 53 OP Tab 1 mg	Varenicline Pfizer	2024
Varicella vaccine [Chickenpox vaccine]	Inj 1350 PFU prefilled syringe	Varivax	2024
Water	Inj 10 ml ampoule Inj 20 ml ampoule	Multichem Fresenius Kabi	2025
Zoledronic acid	Inj 0.05 mg per ml, 100 ml bag Inj 4 mg per 5 ml, vial	Zoledronic Acid Viatris	2025 2024
Zopiclone	Tab 7.5 mg	Zopiclone Actavis	2024

September 2023 changes are in bold type

*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

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Subsidy
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Generic Mnfr
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New Listings

Effective 1 September 2023

34	COLECALCIFEROL * Oral liq 188 mcg per ml (7,500 iu per ml).....	9.00	5 ml OP	✓ Clinicians
51	ATENOLOL * Tab 100 mg.....	14.20	500	✓ Atenolol Viatris
56	COLESTYRAMINE Powder for oral suspension 4 g sachet..... Wastage claimable	61.50	50	✓ Colestyramine – Mylan S29
57	SIMVASTATIN * Tab 10 mg..... * Tab 20 mg..... * Tab 80 mg.....	1.68 2.54 8.81	90 90 90	✓ Simvastatin Viatris ✓ Simvastatin Viatris ✓ Simvastatin Viatris
59	MINOXIDIL ▲ Tab 10 mg..... Wastage claimable	47.04	60	✓ Minoxidil Roma S29
165	VINORELBINE Inj 10 mg per ml, 5 ml vial – PCT only – Specialist.....	168.00	1	✓ Navelbine S29 S29
174	OCTREOTIDE LONG-ACTING – Special Authority see SA2119 – Retail pharmacy Inj depot 10 mg prefilled syringe Inj depot 20 mg prefilled syringe	1,152.00 1,539.00	1 1	✓ Sandostatin LAR ✓ Sandostatin LAR
250	SALBUTAMOL WITH IPRATROPIUM BROMIDE Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule – Up to 20 neb available on a PSO	33.12	60	✓ Duolin Respules S29
286	AMINO ACID FORMULA WITHOUT PHENYLALANINE – Special Authority see SA2229 – Hospital pharmacy [HP3] Powder (Chocolate) 32 g Sachets..... Powder (Raspberry Lemonade) 32 g Sachets..... Powder (Smooth) 32 g Sachets Powder (Vanilla) 32 g Sachets	898.56 898.56 898.56 898.56	30 30 30 30	✓ PKU Build 20 Chocolate ✓ PKU Build 20 Raspberry Lemonade ✓ PKU Build 20 Smooth ✓ PKU Build 20 Vanilla

Effective 1 August 2023

134	VIGABATRIN – Special Authority see SA2088 – Retail pharmacy ▲ Powder for oral soln 500 mg per sachet.....	71.58	60	✓ Sabril S29
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Changes to Restrictions, Chemical Names and Presentations

Effective 1 September 2023

37 Hypoplastic and Haemolytic (amended Special Authority criteria – amended criteria shown only)

▶ **SA2266 4775** Special Authority for Subsidy

Initial application — (chronic renal failure) from any **specialist relevant practitioner**.

Approvals valid for 2 years for applications meeting the following criteria:

All of the following:

- 1 Patient in chronic renal failure; and
- 2 Haemoglobin is less than or equal to 100g/L; and
- 3 Any of the following:
 - 3.1 Both:
 - 3.1.1 Patient does not have diabetes mellitus; and
 - 3.1.2 Glomerular filtration rate is less than or equal to 30ml/min; or
 - 3.2 Both:
 - 3.2.1 Patient has diabetes mellitus; and
 - 3.2.2 Glomerular filtration rate is less than or equal to 45ml/min; or
 - 3.3 Patient is on haemodialysis or peritoneal dialysis.

Renewal — (chronic renal failure) from any **specialist relevant practitioner**. Approvals valid for 2 years where the treatment remains appropriate and the patient is benefiting from treatment.

EPOETIN ALFA – Special Authority see **SA2266 4775** – Retail pharmacy

Wastage claimable

Inj 1,000 iu in 0.5 ml, syringe	250.00	6	✓ Binocrit
Inj 2,000 iu in 1 ml, syringe	100.00	6	✓ Binocrit
Inj 3,000 iu in 0.3 ml, syringe	150.00	6	✓ Binocrit
Inj 4,000 iu in 0.4 ml, syringe	96.50	6	✓ Binocrit
Inj 5,000 iu in 0.5 ml, syringe	125.00	6	✓ Binocrit
Inj 6,000 iu in 0.6 ml, syringe	145.00	6	✓ Binocrit
Inj 8,000 iu in 0.8 ml, syringe	175.00	6	✓ Binocrit
Inj 10,000 iu in 1 ml, syringe	197.50	6	✓ Binocrit
Inj 40,000 iu in 1 ml, syringe	250.00	1	✓ Binocrit

46 PEGFILGRASTIM – Special Authority see SA1912 – Retail pharmacy (removal of brand switch fee)

Inj 6 mg per 0.6 ml syringe — Brand switch fee payable (Pharmacode 2657066)	65.00	1	✓ Ziextenzo
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50 FLECAINIDE ACETATE (removal of may dispense stat)

▲ Cap long-acting 100 mg	35.78	90	✓ Flecainide Controlled Release Teva
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Changes to Restrictions – effective 1 September 2023 (continued)

125	LACOSAMIDE – Special Authority see SA2267 2223 – Retail pharmacy (amended Special Authority criteria – amended criteria shown only)			
	▲ Tab 50 mg.....	25.04	14	✓Vimpat
	▲ Tab 100 mg.....	50.06	14	✓Vimpat
		200.24	56	✓Vimpat
	▲ Tab 150 mg.....	75.10	14	✓Vimpat
		300.40	56	✓Vimpat
	▲ Tab 200 mg.....	400.55	56	✓Vimpat

► **SA2267 2223** Special Authority for Subsidy

Initial application from any relevant practitioner. Approvals valid for 15 months for applications meeting the following criteria:

Both:

- 1 Patient has focal epilepsy; and
- 2 Seizures are not adequately controlled by, or patient has experienced unacceptable side effects from, optimal treatment with all of the following: sodium valproate, topiramate, levetiracetam, and any two of carbamazepine, lamotrigine, and phenytoin sodium (see Note).

Note: Those of childbearing potential are not required to trial phenytoin sodium, sodium valproate, or topiramate.

Those who can father children are not required to trial sodium valproate.

133	STIRIPENTOL – Special Authority see SA2268 2217 – Retail pharmacy (amended Special Authority criteria – amended criteria shown only and removal of S29)			
	Cap 250 mg	509.29	60	✓Diacomit S29
	Powder for oral liq 250 mg sachet	509.29	60	✓Diacomit S29
	Wastage claimable			

► **SA2268 2217** Special Authority for Subsidy

Initial application only from a paediatric neurologist or Practitioner on the recommendation of a paediatric neurologist.

Approvals valid for 6 months for applications meeting the following criteria:

Both:

- 1 Patient has confirmed diagnosis of Dravet syndrome; and
- 2 Seizures have been inadequately controlled by appropriate courses of sodium valproate, clobazam and at least two of the following: topiramate, levetiracetam, ketogenic diet.

Note: Those of childbearing potential are not required to trial sodium valproate or topiramate. **Those who can father children are not required to trial sodium valproate.**

Changes to Restrictions – effective 1 September 2023 (continued)

200	GEMTUZUMAB OZOGAMICIN – PCT only – Specialist – Special Authority see SA2269 2†58 (amended Special Authority criteria) Inj 5 mg vial..... 12,973.00 1 ✓ Mylotarg
	<p>➔ SA2269 2†58 Special Authority for Subsidy Initial application only from a haematologist, paediatric haematologist or paediatric oncologist. Approvals valid for 3 months for applications meeting the following criteria: All of the following:</p> <ol style="list-style-type: none"> 1 Patient has not received prior chemotherapy for this condition; and 2 Patient has de novo CD33-positive acute myeloid leukaemia; and 3 Patient does not have acute promyelocytic leukaemia; and 4 Gemtuzumab ozogamicin will be used in combination with standard anthracycline and cytarabine (AraC); and 5 Patient is being treated with curative intent; and 6 Patient's disease risk has been assessed by cytogenetic testing to be good or intermediate; and 7 Patient must be considered eligible for standard intensive remission induction chemotherapy with standard anthracycline and cytarabine (AraC); and 8 Gemtuzumab ozogamicin to be funded for one course only (one dose at 3 mg per m² body surface area or up to 2 vials of 5 mg as separate doses). <p>Note: Acute myeloid leukaemia excludes acute promyelocytic leukaemia and acute myeloid leukaemia that is secondary to another haematological disorder (eg myelodysplasia or myeloproliferative disorder).</p>
239	SIROLIMUS – Special Authority see SA2270 2†18 – Retail pharmacy (amended Special Authority criteria – amended criteria shown only) Tab 1 mg..... 749.99 100 ✓ Rapamune Tab 2 mg..... 1,499.99 100 ✓ Rapamune Oral liq 1 mg per ml..... 449.99 60 ml OP ✓ Rapamune
	<p>➔ SA2270 2†18 Special Authority for Subsidy Initial application — (refractory seizures associated with tuberous sclerosis complex*) only from a neurologist. Approvals valid for 6 months for applications meeting the following criteria: All of the following:</p> <ol style="list-style-type: none"> 1 Patient has epilepsy with a background of documented tuberous sclerosis complex; and 2 Either: <ol style="list-style-type: none"> 2.1 Both: <ol style="list-style-type: none"> 2.1.1 Vigabatrin has been trialed and has not adequately controlled seizures; and 2.1.2 Seizures are not adequately controlled by, or the patient has experienced unacceptable side effects from, optimal treatment with at least two of the following: sodium valproate, topiramate, levetiracetam, carbamazepine, lamotrigine, phenytoin sodium, and lacosamide (see Note); or 2.2 Both: <ol style="list-style-type: none"> 2.2.1 Vigabatrin is contraindicated; and 2.2.2 Seizures are not adequately controlled by, or the patient has experienced unacceptable side effects from, optimal treatment with at least three of the following: sodium valproate, topiramate, levetiracetam, carbamazepine, lamotrigine, phenytoin sodium, and lacosamide (see Note); and 3 Seizures have a significant impact on quality of life; and 4 Patient has been assessed and surgery is considered inappropriate for this patient, or the patient has been assessed and would benefit from mTOR inhibitor treatment prior to surgery. <p>Note: Those of childbearing potential are not required to trial phenytoin sodium, sodium valproate, or topiramate. Those who can father children are not required to trial sodium valproate.</p>

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

* Three months or six months, as applicable, dispensed all-at-once

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Changes to Restrictions – effective 1 September 2023 (continued)

244	TACROLIMUS – Special Authority see SA2271 1745 – Retail pharmacy (amended Special Authority criteria)			
	Cap 0.5 mg	49.60	100	✓ Tacrolimus Sandoz
	Cap 0.75 mg	99.30	100	✓ Tacrolimus Sandoz
	Cap 1 mg	84.30	100	✓ Tacrolimus Sandoz
	Cap 5 mg	248.20	50	✓ Tacrolimus Sandoz

► **SA2271 1745** Special Authority for Subsidy

Initial application — (organ transplant) only from a relevant specialist. Approvals valid without further renewal unless notified where the patient is an organ transplant recipient.

Note: Subsidy applies for either primary or rescue therapy.

Initial application — (non-transplant indications*) only from a relevant specialist. Approvals valid without further renewal unless notified for applications meeting the following criteria:

Both:

1 Patient requires long-term systemic immunosuppression; and

2 **Either:**

2.1 Ciclosporin has been trialed and discontinued treatment because of unacceptable side effects or inadequate clinical response; **or**

2.2 Patient is a child with nephrotic syndrome*.

Note: Indications marked with * are unapproved indications

259	PILOCARPINE NITRATE (reinstate stat dispensing)			
	* Eye drops 2% single dose – Special Authority see SA0895 – Retail pharmacy	34.19	20 dose	✓ Minims Pilocarpine

Changes to Subsidy and Manufacturer's Price

Effective 1 September 2023

11	GLICLAZIDE († subsidy) * Tab 80 mg.....	20.10	500	✓ Glizide
25	URSODEOXYCHOLIC ACID – Special Authority see SA1739 – Retail pharmacy († subsidy) Cap 250 mg	33.95	100	✓ Ursosan
26	ISPAGHULA (PSYLLIUM) HUSK – Only on a prescription († subsidy) * Powder for oral soln	20.00	500 g OP	✓ Konsyl-D
26	DOCUSATE SODIUM – Only on a prescription († subsidy) * Tab 50 mg..... * Tab 120 mg.....	3.20 4.98	100 100	✓ Coloxyl ✓ Coloxyl
26	POLOXAMER – Only on a prescription († subsidy) Not funded for use in the ear. * Oral drops 10%.....	4.17	30 ml OP	✓ Coloxyl
27	MACROGOL 3350 WITH POTASSIUM CHLORIDE, SODIUM BICARBONATE AND SODIUM CHLORIDE († subsidy) Powder for oral soln 13.125 g with potassium chloride 46.6 mg, sodium bicarbonate 178.5 mg and sodium chloride 350.7 mg	8.50	30	✓ Molaxole
33	TRIAMCINOLONE ACETONIDE († subsidy) Paste 0.1%	5.49	5 g OP	✓ Kenalog in Orabase
33	NYSTATIN († subsidy) Oral liq 100,000 u per ml	2.22	24 ml OP	✓ Nilstat
34	PYRIDOXINE HYDROCHLORIDE († subsidy) a) No more than 100 mg per dose b) Only on a prescription * Tab 25 mg – No patient co-payment payable.....	3.43	90	✓ Vitamin B6 25
35	CALCIUM CARBONATE († subsidy) * Tab 1.25 g (500 mg elemental).....	7.28	250	✓ Calci-Tab 500
35	POTASSIUM IODATE († subsidy) * Tab 253 mcg (150 mcg elemental iodine)	5.99	90	✓ NeuroTabs
46	GLUCOSE [DEXTROSE] († subsidy) * Inj 50%, 10 ml ampoule – Up to 5 inj available on a PSO..... * Inj 50%, 90 ml bottle – Up to 5 inj available on a PSO.....	34.75 17.50	5 1	✓ Biomed ✓ Biomed

▲ Three months supply may be dispensed at one time if endorsed
“certified exemption” by the prescriber or pharmacist

* Three months or six months, as
applicable, dispensed all-at-once

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Changes to Subsidy and Manufacturer's Price – effective 1 September 2023 (continued)

53	AMLODIPINE (↑ subsidy)			
	* Tab 2.5 mg.....	1.45	90	✓ Vasorex
	* Tab 5 mg.....	1.21	90	✓ Vasorex
	* Tab 10 mg.....	1.31	90	✓ Vasorex
53	CLONIDINE (↑ subsidy)			
	* Patch 2.5 mg, 100 mcg per day			
	– Only on a prescription	11.70	4	✓ Mylan
	* Patch 7.5 mg, 300 mcg per day			
	– Only on a prescription	17.90	4	✓ Mylan
53	CLONIDINE (↓ subsidy)			
	* Patch 5 mg, 200 mcg per day			
	– Only on a prescription	12.80	4	✓ Mylan
55	INDAPAMIDE (↑ subsidy)			
	* Tab 2.5 mg.....	16.00	90	✓ Dapa-Tabs
57	SIMVASTATIN (↑ subsidy)			
	* Tab 40 mg.....	4.11	90	✓ Simvastatin Viatrix
58	ISOSORBIDE MONONITRATE (↑ subsidy)			
	* Tab 20 mg.....	22.49	100	✓ Ismo 20
	* Tab long-acting 40 mg.....	9.80	30	✓ Ismo 40 Retard
	* Tab long-acting 60 mg.....	13.50	90	✓ Duride
71	AMOROLFINE (↑ subsidy)			
	a) Only on a prescription			
	b) Not in combination			
	Nail soln 5%	21.87	5 ml OP	✓ MycoNail
72	TRIAMCINOLONE ACETONIDE (↑ subsidy)			
	Crm 0.02%	6.49	100 g OP	✓ Aristocort
	Oint 0.02%	6.54	100 g OP	✓ Aristocort
73	METHYLPREDNISOLONE ACEPONATE (↑ subsidy)			
	Crm 0.1%	4.95	15 g OP	✓ Advantan
	Oint 0.1%	4.95	15 g OP	✓ Advantan
76	PERMETHRIN (↑ subsidy)			
	Lotn 5%.....	4.28	30 ml OP	✓ A-Scabies
77	PIMECROLIMUS – Special Authority see SA1970 – Retail pharmacy (↑ subsidy)			
	a) Maximum of 15 g per prescription			
	b) Note: a maximum of 15 g per prescription and no more than one prescription per 12 weeks.			
	Cream 1%	33.00	15 g OP	✓ Elidel
77	PINE TAR WITH TROLAMINE LAURILSULFATE AND FLUORESCEIN – Only on a prescription (↑ subsidy)			
	* Soln 2.3% with trolamine laurilsulfate and fluorescein sodium	5.41	500 ml	✓ Pinetarsol

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Changes to Subsidy and Manufacturer's Price – effective 1 September 2023 (continued)

83	CYPROTERONE ACETATE WITH ETHINYLOESTRADIOL († subsidy) * Tab 2 mg with ethinyloestradiol 35 mcg and 7 inert tabs – Up to 168 tab available on a PSO.....	5.08	168	✓ Ginet
83	NYSTATIN († subsidy) Vaginal crm 100,000 u per 5 g with applicator(s).....	5.70	75 g OP	✓ Nilstat
83	OESTRIOL († subsidy) * Crm 1 mg per g with applicator..... * Pessaries 500 mcg.....	6.95 7.55	15 g OP 15	✓ Ovestin ✓ Ovestin
85	SODIUM CITRO-TARTRATE († subsidy) * Grans eff 4 g sachets.....	3.50	28	✓ Ural
88	TETRACOSACTRIN († subsidy) * Inj 250 mcg per ml, 1 ml ampoule.....	86.25	1	✓ Synacthen ✓ UK Synacthen
88	TRIAMCINOLONE ACETONIDE († subsidy) Inj 10 mg per ml, 1 ml ampoule Inj 40 mg per ml, 1 ml ampoule	21.42 52.63	5 5	✓ Kenacort-A 10 ✓ Kenacort-A 40
90	OESTRIOL († subsidy) * Tab 2 mg.....	7.70	30	✓ Ovestin
95	DESMOPRESSIN ACETATE († subsidy) ▲ Nasal spray 10 mcg per dose	34.95	6 ml OP	✓ Desmopressin-PH&T
100	AMOXICILLIN († subsidy) Grans for oral liq 125 mg per 5 ml a) Up to 200 ml available on a PSO b) Wastage claimable Grans for oral liq 250 mg per 5 ml	2.22 2.81	100 ml 100 ml	✓ Alphamox 125 ✓ Alphamox 250
100	AMOXICILLIN WITH CLAVULANIC ACID († subsidy) Tab 500 mg with clavulanic acid 125 mg – Up to 30 tab available on a PSO.....	1.59	10	✓ Curam Duo 500/125
100	BENZYLPENICILLIN SODIUM [PENICILLIN G] († subsidy) Inj 600 mg (1 million units) vial – Up to 5 inj available on a PSO.....	16.50	10	✓ Sandoz
100	FLUCLOXACILLIN († subsidy) Inj 1 g vial – Up to 5 inj available on a PSO.....	6.00	5	✓ Flucil

▲ Three months supply may be dispensed at one time if endorsed
“certified exemption” by the prescriber or pharmacist

* Three months or six months, as
applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Subsidy and Manufacturer's Price – effective 1 September 2023 (continued)

104	VANCOMYCIN – Subsidy by endorsement († subsidy) Only if prescribed for a dialysis or cystic fibrosis patient or for prophylaxis of endocarditis or for treatment of Clostridium difficile following metronidazole failure and the prescription is endorsed accordingly. Inj 500 mg vial.....	3.38	1	✓ Mylan
105	TERBINAFINE († subsidy) * Tab 250 mg.....	8.97	84	✓ Deolate
108	LAMIVUDINE – Special Authority see SA1685 – Retail pharmacy († subsidy) Tab 100 mg.....	12.06	28	✓ Zetlam
114	LAMIVUDINE – Special Authority see SA2139 – Retail pharmacy († subsidy) Tab 150 mg.....	98.00	60	✓ Lamivudine Viatris
114	DARUNAVIR – Special Authority see SA2139 – Retail pharmacy († subsidy) Tab 400 mg..... Tab 600 mg.....	150.00 225.00	60 60	✓ Darunavir Viatris ✓ Darunavir Viatris
127	PARACETAMOL († subsidy) * Suppos 125 mg..... * Suppos 250 mg..... * Suppos 500 mg.....	4.29 5.39 16.55	10 10 50	✓ Gacet ✓ Gacet ✓ Gacet
137	OLANZAPINE – Safety medicine; prescriber may determine dispensing frequency († subsidy) Tab orodispersible 5 mg..... Tab orodispersible 10 mg.....	2.42 2.89	28 28	✓ Zypine ODT ✓ Zypine ODT
135	RIZATRIPTAN († subsidy) Tab orodispersible 10 mg.....	4.84	30	✓ Rizamelt
138	QUETIAPINE – Safety medicine; prescriber may determine dispensing frequency († subsidy) Tab 25 mg..... Tab 100 mg..... Tab 200 mg..... Tab 300 mg.....	2.36 6.40 10.97 15.83	90 90 90 90	✓ Quetapel ✓ Quetapel ✓ Quetapel ✓ Quetapel
143	TEMAZEPAM – Safety medicine; prescriber may determine dispensing frequency († subsidy) Tab 10 mg.....	1.40	25	✓ Normison
166	VINORELBINE († subsidy) Inj 1 mg for ECP – PCT only – Specialist.....	3.80	1 mg	✓ Baxter
259	ATROPINE SULPHATE († subsidy) * Eye drops 1%.....	18.27	15 ml OP	✓ Atropt

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Delisted Items

Effective 1 September 2023

8	GLYCOPYRRONIUM BROMIDE Inj 200 mcg per ml, 1 ml ampoule – Up to 10 inj available on a PSO.....	65.45	10	✓ Max Health
47	WATER 1) On a prescription or Practitioner's Supply Order only when on the same form as an injection listed in the Pharmaceutical Schedule requiring a solvent or diluent; or 2) On a bulk supply order; or 3) When used in the extemporaneous compounding of eye drops; or 4) When used for the dilution of sodium chloride soln 7% for cystic fibrosis patients only. Inj 10 ml ampoule – Up to 5 inj available on a PSO.....	7.19	50	✓ Pfizer ✓ Pfizer
Note – this delist applies to Pharmacodes 2511932 and 2549840.				
124	SELEGILINE HYDROCHLORIDE – Subsidy by endorsement Subsidy by endorsement – Subsidised for patients who were taking selegiline hydrochloride prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of selegiline hydrochloride. * Tab 5 mg.....	48.00	100	✓ Eldepryl S29
142	MIDAZOLAM – Safety medicine; prescriber may determine dispensing frequency Inj 1 mg per ml, 5 ml ampoule	3.95	10	✓ Midazolam Mylan
256	CHLORAMPHENICOL Eye drops 0.5%	7.50	10 ml OP	✓ Chlorafast
260	NAPHAZOLINE HYDROCHLORIDE * Eye drops 0.1%	4.15	15 ml OP	✓ Naphcon Forte
Note – delisting revoked.				
261	PHARMACY SERVICES * Brand switch fee..... a) May only be claimed once per patient. b) The Pharmacode for BSF Ziextenzo is 2657066	4.50	1 fee	✓ BSF Ziextenzo
288	DIPHtheria, Tetanus and Pertussis Vaccine a) Only on a prescription b) No patient co-payment payable c) A) Funded for any of the following criteria: 1) A single dose for pregnant women in the second or third trimester of each pregnancy; or 2) A single dose for parents or primary caregivers of infants admitted to a Neonatal Intensive Care Unit or Specialist Care Baby Unit for more than 3 days, who had not been exposed to maternal vaccination at least 14 days prior to birth; or 3) A course of up to four doses is funded for children from age 7 up to the age of 18 years inclusive to complete full primary immunisation; or 4) An additional four doses (as appropriate) are funded for (re-)immunisation for patients post haematopoietic stem cell transplantation or chemotherapy; pre or post splenectomy; pre- or post solid organ transplant, renal dialysis and other severely immunosuppressive regimens; or 5) A single dose for vaccination of patients aged from 65 years old; or			

continued...

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

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Subsidy
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Delisted Items – effective 1 September 2023 (continued)

continued...

- 6) A single dose for vaccination of patients aged from 45 years old who have not had 4 previous tetanus doses; or
- 7) For vaccination of previously unimmunised or partially immunised patients; or
- 8) For revaccination following immunosuppression; or
- 9) For boosting of patients with tetanus-prone wounds.

Notes: Please refer to the Immunisation Handbook for appropriate schedule for catch up programmes.

- B) Contractors will be entitled to claim payment from the Funder for the supply of diphtheria, tetanus and pertussis vaccine to patients eligible under the above criteria pursuant to their contract with Te Whatu Ora Health New Zealand for subsidised immunisation, and they may only do so in respect of the diphtheria, tetanus and pertussis vaccine listed in the Pharmaceutical Schedule.
- C) Contractors may only claim for patient populations within the criteria that are covered by their contract, which may be a sub-set of the population described in paragraphs 1 – 9 above.

Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe..... 0.00 1 ✓Boostrix

293 MEASLES, MUMPS AND RUBELLA VACCINE

- a) Only on a prescription
- b) No patient co-payment payable
- c)

A) Measles, mumps and rubella vaccine

A maximum of two doses for any patient meeting the following criteria:

- 1) For primary vaccination in children; or
- 2) For revaccination following immunosuppression; or
- 3) For any individual susceptible to measles, mumps or rubella; or
- 4) A maximum of three doses for children who have had their first dose prior to 12 months.

Note: Please refer to the Immunisation Handbook for appropriate schedule for catch up programmes. Although a price is listed for the vaccine, doctors can still order measles mumps and rubella vaccine free of charge, as with other Schedule vaccines.

- B) Contractors will be entitled to claim payment for the supply of measles, mumps and rubella vaccine to patients eligible under the above criteria pursuant to their contract with Health NZ for subsidised immunisation, and they may only do so in respect of the measles, mumps and rubella vaccine listed in the Pharmaceutical Schedule.
- C) Contractors can only claim for patient populations within the criteria that are covered by their contract, which may be a sub-set of the population described in paragraph A above.

Inj, measles virus 1,000 CCID50, mumps virus 5, 012 CCID50, Rubella virus 1,000 CCID50; prefilled syringe/ampoule of diluent 0.5 ml..... 0.00 5 ✓MMR II

298 VARICELLA ZOSTER VIRUS (OKA STRAIN) LIVE ATTENUATED VACCINE [SHINGLES VACCINE] – [Xpharm]

Funded for patients meeting the following criteria:

- 1) One dose for all people aged 65 years

Inj 19,400 PFU prefilled syringe plus vial 0.00 1 ✓Zostavax
10 ✓Zostavax

Items to be Delisted

Effective 1 October 2023

294 MENINGOCOCCAL (GROUPS A, C, Y AND W-135) CONJUGATE VACCINE

- a) Only on a prescription
b) No patient co-payment payable
c)
A) Any of the following:
1) Up to three doses and a booster every five years for patients pre- and post splenectomy and for patients with functional or anatomic asplenia, HIV, complement deficiency (acquired or inherited), or pre or post solid organ transplant; or
2) One dose for close contacts of meningococcal cases of any group; or
3) One dose for person who has previously had meningococcal disease of any group; or
4) A maximum of two doses for bone marrow transplant patients; or
5) A maximum of two doses for person pre- and post-immunosuppression*;
B) Both:
1) Person is aged between 13 and 25 years, inclusive; and
2) One dose for individuals who are entering within the next three months, or in their first year of living in boarding school hostels, tertiary education halls of residence, military barracks, Youth Justice residences, or prisons.
C) Contractors will be entitled to claim payment from the Funder for the supply of Meningococcal A, C, Y and W-135 vaccine to patients eligible under the above criteria pursuant to their contract with Te Whatu Ora Health New Zealand for subsidised immunisation, and they may only do so in respect of the Meningococcal A, C, Y and W-135 vaccine listed in the Pharmaceutical Schedule.
D) Contractors may only claim for patient populations within the criteria that are covered by their contract, which may be a sub-set of the population described in paragraphs A-B above.

Note: children under seven years of age require two doses 8 weeks apart, a booster dose three years after the primary series and then five yearly.

*Immunosuppression due to steroid or other immunosuppressive therapy must be for a period of greater than 28 days.

Inj 4 mcg of each meningococcal polysaccharide
conjugated to a total of approximately 48 mcg of

diphtheria toxoid carrier per 0.5 ml vial	0.00	1	✓ Menactra
		5	✓ Menactra

Effective 1 December 2023

56 ROSUVASTATIN — Special Authority see SA2093 — Retail pharmacy

* Tab 5 mg	1.29	30	✓ Rosuvastatin Viatrix
* Tab 10 mg	1.69	30	✓ Rosuvastatin Viatrix

Rosuvastatin Viatrix tab 5 mg (Pharmacode 2616742) and 10 mg (Pharmacode 2616750), 30 tab blister pack, delisting delayed until 1 October 2024.

56 ROSUVASTATIN — Special Authority see SA2093 — Retail pharmacy

* Tab 20 mg	2.71	30	✓ Rosuvastatin Viatrix
* Tab 40 mg	4.55	30	✓ Rosuvastatin Viatrix

Note – Rosuvastatin Viatrix tab 20 mg (Pharmacode 2616769) and 40 mg (Pharmacode 2616777), 30 tab blister pack, delisting delayed until 1 April 2024.

165 VINORELBINE

Inj 50 mg for ECP – PCT only – Specialist	328.65	50 mg OP	✓ Baxter (Sagent S29)
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Items to be Delisted – effective 1 January 2024

155	CAPECITABINE – Retail pharmacy – Specialist Tab 500 mg.....	49.00	120	✓ Capecitabine-DRLA S29
286	AMINO ACID FORMULA WITHOUT PHENYLALANINE – Special Authority see SA2229 – Hospital pharmacy [HP3] Powder (Chocolate) 32 g Sachets.....	898.56	30	✓ PKU Build 20 Chocolate
	Powder (Raspberry Lemonade) 32 g Sachets.....	898.56	30	✓ PKU Build 20 Raspberry Lemonade
	Powder (Smooth) 32 g Sachets	898.56	30	✓ PKU Build 20 Smooth
	Powder (Vanilla) 32 g Sachets	898.56	30	✓ PKU Build 20 Vanilla

Effective 1 February 2024

26	ISPAGHULA (PSYLLIUM) HUSK – Only on a prescription * Powder for oral soln	6.00	250 g OP	✓ Macro Organic Psyllium Husk
53	NIFEDIPINE * Tab long-acting 30 mg.....	34.10	100	✓ Mylan (24 hr release) S29
57	SIMVASTATIN * Tab 10 mg..... * Tab 20 mg..... * Tab 40 mg..... * Tab 80 mg.....	1.23 2.03 3.58 7.12	90 90 90 90	✓ Simvastatin Mylan ✓ Simvastatin Mylan ✓ Simvastatin Mylan ✓ Simvastatin Mylan
76	PERMETHRIN Crm 5%	5.75	30 g OP	✓ Lyderm
109	TENOFOVIR DISOPROXIL Tenofovir disoproxil prescribed under endorsement for the treatment of HIV is included in the count of up to 4 subsidised antiretrovirals for the purposes of Special Authority SA2139. * Tab 245 mg (300 mg as a maleate)	15.00	30	✓ Tenofovir Disoproxil Mylan
109	VALGANCICLOVIR – Special Authority see SA1993 – Retail pharmacy Tab 450 mg.....	132.00	60	✓ Valganciclovir Mylan
143	TRIAZOLAM – Subsidy by endorsement a) Safety medicine; prescriber may determine dispensing frequency b) Subsidised for patients who were taking triazolam prior to 1 June 2023 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of triazolam in the preceding 12 months. Tab 125 mcg..... (9.85) Tab 250 mcg..... (11.20)	5.10 4.10	100 100	Hypam Hypam

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(Mnfr's price)
\$ Per

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Items to be Delisted – effective 1 February 2024 (continued)

252	MONTELUKAST			
	* Tab 4 mg.....	3.10	28	✓ Montelukast Mylan
	* Tab 10 mg.....	2.90	28	✓ Montelukast Mylan

Effective 1 March 2024

34	COLECALCIFEROL			
	* Oral liq 188 mcg per ml (7,500 iu per ml).....	9.00	4.8 ml OP	✓ Puria

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

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